CERTIFICATE OF TRANSMISSION I hereby certify that this paper and every paper referred to therein as being facsimile transmitted to (703) 872-9306: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: November 9, 2005

(Date of Deposit)

Signature

PATENT APPLICATION Attorney Docket No: 10007751-1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Catherine Jo Fitch

Serial No.:

10/010,462

Group Art Unit: 2622

Filed:

Nov. 8, 2001

Examiner: Mark R. Milla

For:

PRINTER HELP APPARATUS AND METHOD

AMENDMENT UNDER 37 CFR 1.111

Hon. Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated August 9, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of the claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.

4.

HEWLETT-PACKARD COMPANY Intellectual Property Administration P. O. Box 272400 Fort Collins, Colorado 80527-2400

PATENT APPLICATION

ATTORNEY DOCKET NO. ____10007751-1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

inventor(s):

Catherine Jo Fitch

Confirmation No.: 7844

Application No.: 10/010,462

Examiner: Mark R. Milla

Filing Date:

11/08/2001

Group Art Unit: 2622

Title:

PRINTER HELP APPARATUS AND METHOD

RECEIVED

NOV 0 9 2005

Mail Stop Amendment **Commissioner For Patents** PO Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:							
Tran	nsmitted herewith is/are the following in the	above-identified application:					
(X)	Response/Amendment	() Petition to extend time to respond					
()	New fee as calculated below	() Supplemental Declaration					
(X)	No additional fee						
() 	Other:	(fee \$					
	CLAIMS AS AMENDED BY OTHER THAN A SMALL ENTITY						

(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	MAINING NUMBER		HIGHEST NUMBER PREVIOUSLY PAID FOR		(5) PRESENT EXTRA		(6) RATE	(7) ADDITIONAI FEES	
TOTAL	CLAIMS 20 MINUS INDEP. 4 MINUS					0	x	\$50	\$	0
INDEP. CLAIMS				= 0		× \$200	\$	0		
() FIR	9T PRESENTATION OF A	MULTIPLE	DEPENDENT	CLAIM	,		+	\$360	\$	(
EXTENSION FEE	1ST MONTH \$120.00		MONTH 0.00	3RD MON \$1020.00			4TH MONTH \$1590.00		\$	(
					-	0	THER	FEES	\$	
			TOTAL AL	DDITIONAL FE	E FOR	THIS A	MEND	MENT	9	

to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 08-2025 under 37 CFR 1.16, 1.17, 1.19, 1.20 and 1.21. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

(X) I hereby certify that this paper is being transmitted to the Patent and Trademark Office facsimile

number <u>(571) 273-8300</u> Number of pages: 9 Nov. 9, 2005

Catherine Jo Fitch

Edmond A. DeFrank

Attorney/Agent for Applicant(s)

Reg. No. 37,814

Date: Nov. 9, 2005